



0003423695

**STATE OF IDAHO****Office of the secretary of state, Lawrence Denney  
FOREIGN REGISTRATION STATEMENT (LIMITED  
LIABILITY COMPANY)**Idaho Secretary of State  
PO Box 83720  
Boise, ID 83720-0080  
(208) 334-2301

Filing Fee: \$100.00 - Make Checks Payable to Secretary of State

For Office Use Only

**-FILED-**

File #: 0003423695

Date Filed: 2/6/2019 10:49:17 AM

| 1. The name this limited liability company will use in Idaho is:                                                                                                                                                      |        |                                                                                                                                                                   |      |       |         |             |        |                                                    |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|-------|---------|-------------|--------|----------------------------------------------------|
| Entity name                                                                                                                                                                                                           |        | Lauder Management LLC                                                                                                                                             |      |       |         |             |        |                                                    |
| 2. Home Jurisdiction                                                                                                                                                                                                  |        |                                                                                                                                                                   |      |       |         |             |        |                                                    |
| The jurisdiction of formation is:                                                                                                                                                                                     |        | WASHINGTON                                                                                                                                                        |      |       |         |             |        |                                                    |
| 3. The street address of its domestic principal office (if required by the laws of the jurisdiction of formation) is:                                                                                                 |        |                                                                                                                                                                   |      |       |         |             |        |                                                    |
| Street Address                                                                                                                                                                                                        |        | 10400 NE 4TH ST<br>STE 500<br>BELLEVUE, WA 98004                                                                                                                  |      |       |         |             |        |                                                    |
| 4. The mailing address of its domestic principal office (if required by the laws of the jurisdiction of formation) is:                                                                                                |        |                                                                                                                                                                   |      |       |         |             |        |                                                    |
| Mailing Address                                                                                                                                                                                                       |        | 10400 NE 4TH ST<br>STE 500<br>BELLEVUE, WA 98004                                                                                                                  |      |       |         |             |        |                                                    |
| 5. The complete street address of the principal office is:                                                                                                                                                            |        |                                                                                                                                                                   |      |       |         |             |        |                                                    |
| Principal Office Address                                                                                                                                                                                              |        | 128 W C ST<br>MOSCOW, ID 83843                                                                                                                                    |      |       |         |             |        |                                                    |
| 6. The mailing address of the principal office is:                                                                                                                                                                    |        |                                                                                                                                                                   |      |       |         |             |        |                                                    |
| Mailing Address                                                                                                                                                                                                       |        | 128 W C ST<br>MOSCOW, ID 83843                                                                                                                                    |      |       |         |             |        |                                                    |
| 7. Registered Agent Name and Address                                                                                                                                                                                  |        |                                                                                                                                                                   |      |       |         |             |        |                                                    |
| Registered Agent                                                                                                                                                                                                      |        | 3H AGENT SERVICES, INC.<br>Commercial Registered Agent<br>Physical Address<br>1215 W HAYS<br>BOISE, ID 83702<br>Mailing Address<br>1215 W HAYS<br>BOISE, ID 83702 |      |       |         |             |        |                                                    |
| 8. Governors                                                                                                                                                                                                          |        |                                                                                                                                                                   |      |       |         |             |        |                                                    |
| <table border="1"><thead><tr><th>Name</th><th>Title</th><th>Address</th></tr></thead><tbody><tr><td>justin sult</td><td>member</td><td>235 LAUDER AVE<br/>APT 434<br/>MOSCOW, ID 83843-2596</td></tr></tbody></table> |        |                                                                                                                                                                   | Name | Title | Address | justin sult | member | 235 LAUDER AVE<br>APT 434<br>MOSCOW, ID 83843-2596 |
| Name                                                                                                                                                                                                                  | Title  | Address                                                                                                                                                           |      |       |         |             |        |                                                    |
| justin sult                                                                                                                                                                                                           | member | 235 LAUDER AVE<br>APT 434<br>MOSCOW, ID 83843-2596                                                                                                                |      |       |         |             |        |                                                    |
| Signature of individual authorized by the entity to sign:                                                                                                                                                             |        |                                                                                                                                                                   |      |       |         |             |        |                                                    |
| <u>Andrew Smith</u>                                                                                                                                                                                                   |        | <u>02/06/2019</u>                                                                                                                                                 |      |       |         |             |        |                                                    |
| Sign Here                                                                                                                                                                                                             |        | Date                                                                                                                                                              |      |       |         |             |        |                                                    |
| Signer's Title: Member                                                                                                                                                                                                |        |                                                                                                                                                                   |      |       |         |             |        |                                                    |
| Print & Mail Enclosures                                                                                                                                                                                               |        |                                                                                                                                                                   |      |       |         |             |        |                                                    |
| Certificate of Existence/Good Standing from the State in which this entity was originally formed dated within 90 days of today.                                                                                       |        |                                                                                                                                                                   |      |       |         |             |        |                                                    |
| Payment in the amount of \$100.00 - checks payable to the Secretary of State, signed and recently dated.                                                                                                              |        |                                                                                                                                                                   |      |       |         |             |        |                                                    |
| This filing form (submit within 30 days) with the required signature(s).                                                                                                                                              |        |                                                                                                                                                                   |      |       |         |             |        |                                                    |

B0165-3685 02/06/2019 10:50 AM Received by ID Secretary of State Lawrence Denney

UNITED STATES OF AMERICA

The State of  Washington

Secretary of State

I, **KIM WYMAN**, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

**CERTIFICATE OF EXISTENCE**

**OF**

**LAUDER MANAGEMENT LLC**

**I CERTIFY** that the records on file in this office show that the above named entity was formed under the laws of the State of Washington and that its public organic record was filed in Washington and became effective on 02/01/2019.

**I FURTHER CERTIFY** that the entity's duration is Perpetual, and that as of the date of this certificate, the records of the Secretary of State do not reflect that this entity has been dissolved.

**I FURTHER CERTIFY** that all fees, interest, and penalties owed and collected through the Secretary of State have been paid.

**I FURTHER CERTIFY** that the most recent annual report has been delivered to the Secretary of State for filing and that proceedings for administrative dissolution are not pending.

Issued Date: 02/06/2019  
UBI Number: 604 371 199



Given under my hand and the Seal of the State  
of Washington at Olympia, the State Capital

A handwritten signature in blue ink that reads "Kim Wyman".

Kim Wyman, Secretary of State

Date Issued: 02/06/2019